

LAKEPORT MAIN STREET ASSOCIATION FOURTH OF JULY



Vendor Application

APPLICANT NAME: _____

DBA IF APPLICABLE: _____

MAILING ADDRESS: _____

PHONE: _____ EMAIL: _____

BUSINESS/PRODUCT DESCRIPTION

10X10 VENDOR BOOTH \$125 __

ELECTRICAL \$15 __

10X12 FOOD BOOTH \$150 __

ONE TIME BUSINESS LICENSE \$14 __

FOOD TRUCK \$350 __

(N/A IF YOU HAVE A CURRENT LICENSE)

TOTAL FEES DUE

Please visit Lakeportmainstreet.com for details on event dates and application due dates. \$25 of booths & \$50 off trucks available (except for Taste in Lakeport event) for completed applications received 8 weeks prior to event.

All vendors are responsible for providing their own awnings, tables & chairs.

All vendors must submit a copy of their Certificate of Liability Insurance to cover you for the event.

You must name the City of Lakeport, Lakeport Main Street Association, and the County of Lake as additional insured. If you do not have insurance, a link to a provider is on our website.

Your booth must fit within the boundaries of your purchased space. This includes all containers, garbage receptacles, cooking appliances, etc., additional spaces may also be purchased. You are to provide your own UL approved electrical cords for power hookup. LMSA will provide access to power if requested and paid for prior to event.

To ensure your reservation, All documents must be COMPLETE and RETURNED NO LATER than 10 DAYS prior to the event.

to include; One time business license, Hold harmless agreement and this application. FOOD VENDORS MUST OBTAIN HEALTH PERMIT. All forms can be found on our website. All Events go on Rain or Shine and fees are non-refundable. Booth fees will be refunded only if event is canceled by LMSA.

Mail all forms and payments to PO Box 1032 Lakeport, Ca 95453

Drop off in person to 140 North Main St.

Online payments can be made via PayPal @ lakeportmainstreet.com

and forms can be emailed to admin@lakeportmainstreet.com

(There is a small fee for online payments)

LMSA is not responsible for lost mail.

SIGNATURE: _____ DATE: _____

